

Form **990**Department of the  
Treasury  
Internal Revenue Service**Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020****Open to Public  
Inspection****A For the 2020 calendar year, or tax year beginning 01-01-2020, and ending 12-31-2020****B** Check if applicable:

- ☐ Address change  
☐ Name change  
☐ Initial return  
☐ Final return/terminated  
☐ Amended return  
☐ Application pending

**C** Name of organization  
National Association of Realtors

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
430 N Michigan AveCity or town, state or province, country, and ZIP or foreign postal code  
Chicago, IL 60611**F** Name and address of principal officer:Bob Goldberg CEO  
430 N Michigan Ave  
Chicago, IL 60611**D** Employer identification number

36-1520690

**E** Telephone number

(312) 329-8200

**G** Gross receipts \$ 538,337,118**I** Tax-exempt status: ☐ 501(c)(3) ☒ 501(c)(6) (Insert no.) ☐ 4947(a)(1) or ☐ 527**J** Website: ▶ [www.realtor.org](http://www.realtor.org)**H(a)** Is this a group return for subordinates? ☐ Yes ☒ No**H(b)** Are all subordinates included? ☐ Yes ☐ No

If "No," attach a list. (see instructions)

**H(c)** Group exemption number ▶**K** Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other ▶**L** Year of formation: 1908**M** State of legal domicile: IL**Part I Summary**

Activities &amp; Governance

**1** Briefly describe the organization's mission or most significant activities:

The NATIONAL ASSOCIATION OF REALTORS provides a facility for professional development &amp; exchange of information among its members and the public in order to preserve, protect and advance the right to real property for all.

**2** Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.

<b>3</b> Number of voting members of the governing body (Part VI, line 1a)	3	1,192
<b>4</b> Number of independent voting members of the governing body (Part VI, line 1b)	4	1,188
<b>5</b> Total number of individuals employed in calendar year 2020 (Part V, line 2a)	5	363
<b>6</b> Total number of volunteers (estimate if necessary)	6	2,200
<b>7a</b> Total unrelated business revenue from Part VIII, column (C), line 12	7a	7,826,406
<b>7b</b> Net unrelated business taxable income from Form 990-T, line 39	7b	3,095,239

Revenue

Expenses

Net Assets or Fund Balances

	Prior Year	Current Year
<b>8</b> Contributions and grants (Part VIII, line 1h)	0	0
<b>9</b> Program service revenue (Part VIII, line 2g)	287,315,985	290,187,690
<b>10</b> Investment income (Part VIII, column (A), lines 3, 4, and 7d)	39,236,804	3,667,176
<b>11</b> Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	11,684,968	7,201,417
<b>12</b> Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	338,237,757	301,056,283
<b>13</b> Grants and similar amounts paid (Part IX, column (A), lines 1–3)	171,500	36,009,722
<b>14</b> Benefits paid to or for members (Part IX, column (A), line 4)	0	0
<b>15</b> Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	59,040,322	64,168,590
<b>16a</b> Professional fundraising fees (Part IX, column (A), line 11e)	0	0
<b>b</b> Total fundraising expenses (Part IX, column (D), line 25) ▶ 0		
<b>17</b> Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	162,787,454	176,732,256
<b>18</b> Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	221,999,276	276,910,568
<b>19</b> Revenue less expenses. Subtract line 18 from line 12	116,238,481	24,145,715
	Beginning of Current Year	End of Year
<b>20</b> Total assets (Part X, line 16)	697,288,307	868,094,059
<b>21</b> Total liabilities (Part X, line 26)	219,017,692	252,023,615
<b>22</b> Net assets or fund balances. Subtract line 21 from line 20	478,270,615	616,070,444

**Part II Signature Block**

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**\*\*\*\*\*  
Signature of officer2021-11-15  
DateJOHN PIERPOINT CFO  
Type or print name and title**Paid Preparer Use Only**

Print/Type preparer's name

Preparer's signature

Date

Check ☐ if self-employed PTIN P00666837

Firm's name ▶ Grant Thornton LLP

Firm's EIN ▶ 36-6055558

Firm's address ▶ 171 N Clark St Suite 200  
Chicago, IL 60601

Phone no. (312) 856-0200

May the IRS discuss this return with the preparer shown above? (see instructions) ☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat. No. 11282Y

Form **990** (2020)